

2019 Energy Code Prescriptive Compliance

Lowrise Residential Alterations

CF-1R-ALT

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Does the project involve an alteration to existing conditioned floor area*? *Conditioned floor area is added area that is heated or cooled. Garages, for example, would not be included in this area. Are new windows being added to the home?	YES NO YES NO	If you checked NO, this form cannot be used. If new conditioned floor area is being added, complete a City of Hayward CF-1R-ADD form. If yes, all new windows shall have a U-Factor
This includes new window locations or window enlargements.		of .30 maximum.
Are existing windows being replaced by new windows? (retrofit or new like-for-like).	YES NO	If yes, all replacement windows shall have a U-Factor of .40 maximum.
Are new skylights being installed?	YES NO	If yes, new skylights shall have a u-factor of .55 maximum.
Are existing exterior walls, ceilings or floors being altered?	YES NO	If yes: 2x4 WALS: shall have a minimum of R-13 cavity insulation. 2x6 WALLS: shall have a minimum of R-21 cavity insulation. ROOFS: Altered insulated attics and roofs shall have R-22 insulation.
Is a new forced air unit being added?	YES NO	☐ FLOORS: R-19 If a new FAU is added, HERS RATING IS
13 d New Foreca dir diffe being added.		REQUIRED for duct leakage.
Are more than 40 feet of ducts being added?	YES NO	If more than 40 feet of ducts are added provide R-6 insulation and HERS RATING IS REQUIRED for duct leakage.
Is a new kitchen hood being added or replaced?	YES NO	If yes, HERS rating is required for kitchen hood installations.
Is a water heater being replaced? Note: This form cannot be used with any other water heater type, multiple heaters, and/or recirculation.	IF YES, SELECT ONE OF THE WATER HEATER TYPES ON THE RIGHT.	Select one of the following water heater types: □ Storage Type ≤ 105k btuh, ≥ .60 EF and ≤ 55 gallon storage capacity. □ Tankless type ≤ 200k btuh rated input and ≥ .82EF

HERS VERIFICATION SUMMARY	Check if HERS rating items that apply to this project or N/A for
Please select the HERS verification items	none:
on the right that are required for this	□ N/A
project.	Duct Leakage Test
	Kitchen Exhaust Hood Test
	If HERS rating is required, provide the Building Inspector with HERS rater generated CF-1R, CF-2R and CF-3R prior to final inspection.

APPLICANT'S DECLARATION		
Project Address		
Applicant Name / Phone Number	Signature / Date	

I certify the following under penalty of perjury, under the laws of the State of California:

- 1. The information provided on this Certificate of Compliance is true and correct.
- 2. I am eligible under Division 3 of the Business and Professions Code to accept responsibility for the building design or system design identified on this Certificate of Compliance (responsible designer).
- That the energy features and performance specifications, materials, components, and manufactured devices for the building design or system
 design identified on this Certificate of Compliance conform to the requirements of Title 24, Part 1 and Part 6 of the California Code of
 Regulations.
- 4. The building design features or system design features identified on this Certificate of Compliance are consistent with the information provided on other applicable compliance documents, worksheets, calculations, plans and specifications submitted to the enforcement agency for approval with this building permit application.
- 5. I will ensure that a registered copy of this Certificate of Compliance shall be made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a registered copy of this Certificate of Compliance is required to be included with the documentation the builder provides to the building owner at occupancy.